



<b>Substitute for form PTO/SB/08A&amp;B (07-05)</b>  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (Use as many sheets as necessary)				<b>Complete if Known</b>	
				Application Number	10/830,174
				Filing Date	April 21, 2004
				First Named Inventor	Peinetti, Donald L.
				Art Unit	3643
				Examiner Name	Son T. Nguyen
Sheet	1	of	1	Attorney Docket Number	040180-000140US

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code <sup>2</sup> (if known)			
STN	AA	US-6,928,958 B2	08-16-2006	Crist et al.	
STN	AB	US-6,637,376 B2	10-28-2003	Lee, IV	
	AC	US-			
	AD	US-			

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)				
	AE							<input type="checkbox"/>
	AF							<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
	AG		<input type="checkbox"/>
	AH		<input type="checkbox"/>

Examiner Signature	/Son T. Nguyen/	Date Considered	11/02/2006
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

Substitute for form 1449A&B/PTO				<b>Complete If Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (Use as many sheets as necessary)				Application Number	10/830,174
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Examiner Signature		Date Considered	
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STN	AA	US-6,360,698	03-28-2002	Stapelfeld et al.	
	AB	US-			

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